



Salt River
PIMA-MARICOPA INDIAN COMMUNITY

Community Development Department
Membership and Real Property Management
10005 E. Osborn Rd. Scottsdale, Arizona 85256-9722
Phone (480) 362-7600, Fax (480) 362-7714

ADULT INFORMATION-VERIFICATION FORM

Tribal/Landowner ID Number: _____

Name: _____

First Name

Middle Name

Last Name (Include Jr. or Sr.)

Date of Birth

Social Security Number

Name Change:

First Name

Middle Name

Last Name (Include Jr. or Sr.)

***MUST ATTACH LEGAL DOCUMENTATION OF NAME CHANGE (COURT ORDER, MARRIAGE LICENSE OR DIVORCE DECREE)**

Physical Address:

Is this within the boundaries of SRP-MIC?

☐ No

☐ Salt River

OR

☐ Lehi

Street Address

City

State

Zip Code

Mailing Address: Same as Above ☐

Street Address or Post Office Box

City

State

Zip Code

Email Address: _____

Phone Numbers:

Home: () _____

Mobile: () _____

Other: () _____

Signature: _____

Date

To change the address for minor children under your care, please list their information below:

Full Name of Minor	Date of Birth	Full Name of Minor	Date of Birth	Full Name of Minor	Date of Birth
Full Name of Minor	Date of Birth	Full Name of Minor	Date of Birth	Full Name of Minor	Date of Birth